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|----------------------------------|
| Assessment - 100.2 |
| - Info |
| - ADL |
| - Medical |
| ~ Diagnosis/ ICD-9 |
| ~ Target Group Diagnoses |
| ~ Medications |
| ~ Diet |
| ~ Allergies |
| ~ Prognosis |
| ~ Medical Supports |
| ~ Medical Providers |
| ~ Institutionalization |
| ~ Print Medical Menu |
| - Assessment Demographic |
| - LOC Certification |
| - Verify |
| - Finalize |
| Client Information |
| Transition Assessment & Planning |
| Risk Mitigation Plan |
| Assessment - HCA |
| Case Management |

Add Institutionalizations

Event Number: 1

Report Entry Date: 06/13/2014

Colorado Choice Transitions (CCT) * ☐ Yes ☒ No

Institutionalization Admit Date: (mm/dd/yyyy)

June 2014

| | | | | | | |
|----|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| | | | | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | | | | | |

Admit Date: (mm/dd/yyyy)

Discharge Date: (mm/dd/yyyy)

Days: 0

Reason for Institutionalization:*

Other Reason for Institutionalization

Save

Clear

ERROR

When the Colorado Choice Transitions (CCT) is Yes, then the Institutionalization Estimated Admit Date and Institutionalization Estimated Discharge Date cannot be entered.

Please use the back button and correct the error.